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| <b>FEPA</b> PART  | PRELIMINARY<br>1 - SITE INFORMA   |  |                              | MENT        |                    | NY                                    | NE          |             |        |
|---|---|--|------------------------------|-------------|--------------------|---------------------------------------|-------------|-------------|--------|
| II. SITE NAME AND LOCATION  |   |  |                              |             |                    |                                       |             | <del></del> |        |
| O1 SITE NAME (Legal, common, or descriptive name of site)   |   | 02 STREE   | T, ROUTE NO., O              | R SPECIF    | IC LOCA            | TION IDENTIFIER                       |             |             |        |
| Babylon Landfill  |   | E  | dison Ave                    | э,          |                    |                                       |             |             |        |
| 03 CITY   | ·····   | 04 STATE   | 05 ZIP CODE                  | O6 COL      | NTY                |                                       | I           | 07 COUNTY   |        |
| Babylon   |   | NY   | 11702                        | Suf         | folk               |                                       |             | 103         | 02     |
|   | ONGITUDE  | <del>                                     </del> | L                            | <u></u>     |                    | <del></del>                           | 1           | 103         | 1 02   |
| 40 <sup>o</sup> 43' 33 5" W 073 <sup>o</sup> 2  | 22' 40 0"N  | <u>                                     </u>     | ·                            | · ·         |                    | <u> </u>                              |             |             | ·      |
| Southern State Parkway to St  | raight Path   | exit:  | north at                     | Edis        | son A              | ve.                                   |             |             |        |
| III. RESPONSIBLE PARTIES  | ·   | .1   | ****                         | ,           |                    |                                       |             |             |        |
| 01 OWNER (# known)  |   | 02 STREE   | T (Business, mailing,        | residential | )                  |                                       |             |             | -      |
| Town of Babylon   |   | 20   | 0 E. Sun                     | rise        | Hwy.               |                                       |             |             |        |
| 03 CITY   |   | 04 STATE   | 05 ZIP CODE                  | 06          | TELEPH             | ONE NUMBER                            | 1           |             |        |
| Babylon   | •   | NY   | 11757                        | (-          | 516 <sub>) g</sub> | 57-3000                               |             |             |        |
| 07 OPERATOR (If known and different from owner)   | <u> </u>  | OB STREE   | Y (Business, meiling,        |             |                    | <u> </u>                              | <del></del> |             |        |
| 09 CITY   |   | 10 STATE   | 11 ZIP CODE                  | 12          | TELEPHO            | ONE NUMBER                            | T           | _           |        |
| ·   |   |  |                              | l c         | . )                |                                       |             |             |        |
| 14 OWNER/OPERATOR NOTIFICATION ON FILE (Check all that appe)  15 A. RCRA 3001 DATE RECEIVED: MONTH DAY YEAR  17 CHARACTERIZATION OF POTENTIAL HAZARD  10 ON SITE INSPECTION  10 YES DATE 4 13 83 16 6 16 16 16 16 16 16 16 16 16 16 16 1                          | D. B. UNCONTROLL  Check all that apply)  A. EPA XIX B. EPA  E. LOCAL HEALTH OFFI  NTRACTOR NAME(S):  03 YEARS OF OPER.  E. WN, OR ALLEGED | A CONTRA ICIAL [ NUS ATION 1940 LEGINNING YE     | CTOR E F OTHER: _ CORP.  ACT | OSCI DA     | ATE                | □ D. OTHEI (Specify) □ UNKNOV         | R CON       | TRACTOR     | NONE   |
| OS DESCRIPTION OF POTENTIAL HAZARD TO ENVIRONMENT AI Groundwater contamination is  V. PRIORITY ASSESSMENT  OI PRIORITY FOR INSPECTION (Check one. If high or medium is checke  A. HIGH (Inspection required promptly)  VI. INFORMATION AVAILABLE FROM  OI CONTACT | n a sole sour   | metion and Pac<br>evallable bash                 | 13 - Description of Hu       | nzardous Co | onditions an       | d Incidentaj<br>emplete current diapo |             | m)          | NUMBER |
| Mark Haulenbeek   | USEPA, Re   | -  | I. Fdisc                     | on. N       | J                  |                                       | 1           | , 321       |        |
| MAIK NAUTENDEEK  04 PERSON RESPONSIBLE FOR ASSESSMENT   |   |  |                              |             |                    | ONE N. P. 1050                        | Ι`          |             |        |
| Edward F. McTiernan   | 05 AGENCY   | 1  | NIZATION CORP.               |             |                    | ONE NUMBER<br>225–6160                | 08 D/       | 4 29        | /83_   |

EPA FORM 2070-12 (7-81)

| \$<br>EF | PA |
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|          | IFICATION     |
|----------|---------------|
| O1 STATE | 02 SITE NUMBE |

| SE           | PA  |  |   | Y ASSESSMENT<br>E INFORMATION                                  |                                     | NY NY  | NUMBER                                |
|--------------|---|--|---|--|-------------------------------------|--|---------------------------------------|
| II. WASTES   | TATES, QUANTITIES, AN   | ID CHARACTER   | ISTICS  | 1  | ····                                |  | ·                                     |
|              | TATES (Check at that 40PH)    E. SLURRY   R. FINES   F. UOUID   E.   Q. GAS | O2 WASTE QUANT (Measures of must be TONS CUBIC YARDS U | TTY AT SITE<br>of waste quentifies<br>independent | O3 WASTE CHARACTI  A TOXIC  D B. CORRO  C. RADIOA  D 0. PERSIS | DE.SO<br>SIVE DF.INF<br>CTIVE DQ.FU | LUBLE 35 L. HIGHLY ECTIOUS D. J. EXPLO MMABLE D. K. REAC ITTABLE D. L. INCON | DSIVE<br>TIVE                         |
|              | (Specify)   | NO. OF DRUMS   |   | <u> </u>   |                                     | · · · · · · · · · · · · · · · · · · ·  |                                       |
| III. WASTE T | YPE<br>SUBSTANCE N  |  | Las coops success                                 | log unit of the same   |                                     |  |                                       |
| SLU          | SLUDGE  | AME .  | Unknown   | 02 UNIT OF MEASURE   |                                     | formerly rece  | hovie                                 |
| OLW          | OILY WASTE  |  | 0.0.0.0.0.0.0                                     |  |                                     | sludges  |                                       |
| SOL          | SOLVENTS  |  |   |  |                                     |  |                                       |
| PSO          | PESTICIDES  |  |   |  |                                     |  |                                       |
| occ          | OTHER ORGANIC CI  | 1EMICALS   | <u> </u>  |  |                                     |  | <del></del>                           |
| 10C          | INORGANIC CHEMIC  | ALS  |   | ;  |                                     |  |                                       |
| ACD          | ACIDS   |  |   | ·  |                                     |  |                                       |
| BAS          | BASES   |  |   |  |                                     |  |                                       |
| MES          | HEAVY METALS  |  |   |  |                                     |  |                                       |
| IV. HAZARD   | OUS SUBSTANCES (See Ap  | pendix for most frequent                               | ly cited CAS Mumbers)                             |  |                                     |  | · · · · · · · · · · · · · · · · · · · |
| 01 CATEGORY  | 02 SUBSTANCE N.   | <b>АМЕ</b>   | 03 CAS NUMBER                                     | 04 STORAGE/DISF  | OSAL METHOD                         | 05 CONCENTRATION   | 06 MEASURE OF CONCENTRATION           |
| SLU          | Septic Sludg  | es   |   | SI   |                                     |  |                                       |
|              |   |  | ·   |  |                                     |  |                                       |
|              |   |  |   |  |                                     |  |                                       |
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|              | •   | · .  |   |  |                                     | 1  |                                       |
| V. FEEDSTO   | CKS (See Appendix for CAS Mumbe   | ru)  |   |  | ,                                   |  |                                       |
| CATEGORY     | 01 FEEDSTOCK  |  | 02 CAS NUMBER                                     | CATEGORY   | 01 FEEDS                            | TOCK NAME  | 02 CAS NUMBER                         |
| FDS          | Not applica   | able   | ·   | FDS  |                                     |  |                                       |
| FDS          |   |  |   | FDS  |                                     |  |                                       |
| FDS          |   |  |   | FDS  |                                     |  |                                       |
| FDS          |   |  | 1   | FDS  |                                     |  |                                       |
| VI. SOURCES  | OF INFORMATION (Cas a   | pocific references, e.g.,                              | state Mes, sample analysis, re                    | oports)  |                                     |  |                                       |
| N            | ew York State I   | OBC Region   | I files   |  |                                     |  |                                       |

### **SEPA**

## POTENTIAL HAZARDOUS WASTE SITE PRELIMINARY ASSESSMENT

L IDENTIFICATION

01 STATE 02 SITE NUMBER

| PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS   |
|--|
| IL HAZARDOUS CONDITIONS AND INCIDENTS (Continued)  |
| 01 🗆 J. DAMAGE TO FLORA  |
| No potential exists due to extensive development in the vicinity of the site.  |
| 01 EX K. DAMAGE TO FAUNA 02 D OBSERVED (DATE:) XD POTENTIAL D ALLEGED O4 NARRATIVE DESCRIPTION (Include name(s) of apocine)  |
| Contaminants which enter surface waters may impact aquatic fauna in Satapogue<br>Creek and the Great South Bay.  |
| 01 & L. CONTAMINATION OF FOOD CHAIN 02 © OBSERVED (DATE:)   POTENTIAL © ALLEGED 04 NARRATIVE DESCRIPTION   |
| Contaminants which enter surface waters may eventually impact food chains.   |
| 01 EM. UNSTABLE CONTAINMENT OF WASTES  (Spills/Runoff/Standing Rounds, Leaking drums)  03 POPULATION POTENTIALLY AFFECTED: 5,000  04 NARRATIVE DESCRIPTION   |
| Improper daily cover procedures result in exposure of refuse, numerous leachate seeps and refuse being blown about the site.   |
| 01 M N. DAMAGE TO OFFSITE PROPERTY  02 M OBSERVED (DATE: 4/83 ) D POTENTIAL D ALLEGED  14 NARRATIVE DESCRIPTION  Sheet erosion off the east face of the fill results in flooding on local streets.  Also, methane generated from the fill has entered local buildings. |
| 01 O CONTAMINATION OF SEWERS, STORM DRAINS, WWTPs 02 OBSERVED (DATE:) D POTENTIAL D ALLEGED 04 NARRATIVE DESCRIPTION   |
| 01 XP. ILLEGAL/UNAUTHORIZED DUMPING 02 X OBSERVED (DATE: 4/83 ) D POTENTIAL D ALLEGED 04 NARRATIVE DESCRIPTION   |
| Although the site is fenced it appears that refuse is often illegally dumped while the facility is closed.   |
| 05 DESCRIPTION OF ANY OTHER KNOWN, POTENTIAL, OR ALLEGED HAZARDS   |
| Prior to the opening of the Southwest Sewer District in 1981, the landfill receive septic wastes from scavengers serving residential, commercial and industrial clients.   |
| IIL TOTAL POPULATION POTENTIALLY AFFECTED: 250,000   |
| IV. COMMENTS   |
|  |
| V. SOURCES OF INFORMATION (Cee specific references, e. g., state files, sample analysis, reports)  |
| Site Inspection  Babylon Landfill Monitroing Program 1981-1982 Completion Report by Geraghty  & Miller Inc.  Suffolk County Health Dept files Farmingdale, NV  |

|    |        | TIFICATION     |
|----|--------|----------------|
| 01 | STATE  | 02 SITE NUMBER |
| ,  | N 77 1 | 1              |

| <b>SEPA</b>   | •  | INARY ASSESSMENT  | NY                            | SHE NOMBEH               |
|---|--|---|-------------------------------|--------------------------|
| <b>V</b>  | PART 3 - DESCRIPTION OF H  | AZARDOUS CONDITIONS AND INCIDE  | NTS LIVE                      |                          |
| IL HAZARDOUS CONDIT   | IONS AND INCIDENTS   |   |                               |                          |
| the early 19<br>and deep aqu  | le leachate plume eman<br>170s. This plume has<br>11fer with dissolved | 02 % OBSERVED (DATE: 1974) 04 NARRATIVE DESCRIPTION ating from the landfill ha resulted in contamination solids, chlorides, organic | of both the                   | shallow                  |
| organic comp  | ounds.   | <del></del>   | <u> </u>                      |                          |
|   |  | 02 D OBSERVED (DATE:) 04 NARRATIVE DESCRIPTION  | E POTENTIAL                   | D ALLEGED                |
| Satapogue Cr<br>as a result   | reek begins approxima<br>of subsurface migrat                          | tely 2 miles south of the ion of contaminants from t  | site and may<br>the landfill. | be impacted              |
| 01 SEC. CONTAMINATION<br>03 POPULATION POTENT                                     | TALLY AFFECTED: 10,000   | 02 M OBSERVED (DATE: 1979 ) 04 NARRATIVE DESCRIPTION  | D POTENTIAL                   | [] ALLEGED               |
| Methane gene  | eration from the land  | fill has resulted in local  | l air quality                 | problems.                |
| 01 (XD. FIRE/EXPLOSIVE<br>03 POPULATION POTENTI                                   |  | 02 D OBSERVED (DATE:) 04 NARRATIVE DESCRIPTION  | & POTENTIAL                   | D ALLEGED                |
| Poor houseke<br>in potential  | eping practices and<br>fire/explosive cond                             | improper or insufficient uitions.   | use of daily o                | over result              |
| 01 DE. DIRECT CONTAC<br>03 POPULATION POTENTI                                     |  | 02 OBSERVED (DATE:) 04 NARRATIVE DESCRIPTION  | D POTENTIAL                   | ☐ ALLEGED                |
|   | exists for direct or<br>eral population.                               | ontact with hazardous mate  | erial in the .                | landfill                 |
|   | FFECTED:82   | 02 BOBSERVED (DATE: 4/83 ) 04 NARRATIVE DESCRIPTION vely filled. Leachate see   |                               | CI ALLEGED               |
|   |  | 7   |                               | ·                        |
| 01 X) G. DRINKING WATER<br>03 POPULATION POTENTIA                                 | ALLY AFFECTED:250.000  | 02 BOBSERVED (DATE: 1979 ) 04 NARRATIVE DESCRIPTION   | D POTENTIAL                   | [] ALLEGED               |
| Contamination extension of  | on of groundwater has<br>public supply syste                           | resulted in closure of nums and relocation of publi   | merous privatic supply well   | te wells,                |
| 01 D H. WORKER EXPOS  | URE/INJURY   | 02 D OBSERVED (DATE:)   | D POTENTIAL                   | D ALLEGED                |
| 03 WORKERS POTENTIAL  | LY AFFECTED:   | 04 NARRATIVE DESCRIPTION  |                               |                          |
| No reported   | history  |   | ;<br>;                        |                          |
| 01 10 L POPULATION EXPO<br>03 POPULATION POTENTIA<br>Contaminants<br>populations. | ALLYAFFECTED: <u>250,000</u><br>s which enter the gro                  | 02 D OBSERVED (DATE:) 04 NARRATIVE DESCRIPTION undwater supply have the p   | 80 POTENTIAL CO               | OALLEGED<br>impact large |
|   |  | •   |                               |                          |



### EXECUTIVE SUMMARY

| Babylon Landfill Site Name Babylon, New York Address   | EPA Site ID Number 02-8303-07 TDD Number   |
|--|--|
| Babylon, New York  |  |
|  | TDD Number   |
|  |  |
| · · · · · · · · · · · · · · · · · · ·  |  |
|  |  |
| Date of Site Visit: April 13,  | 1983   |
| The state of the s | To desire the second of the se |
| SITE DESCRIPTION   | ing the second of the second o |
|  |  |
| Located in a highly develor  | ped section of central Babylon well documented plume of groundwater ith the landfill. Public and ls have been closed due to contamina orides, organic halogens and   |
| there is an extensive and w  | ith the landfill. Public and   |
| orivate drinking water well  | ls have been closed due to contamina   |
| with dissolved solids, chicother organic compounds.  | oritides, organic narogens and   |
|  |  |
| ±°1  |  |
|  |  |
| PRIORITY FOR FURTHER ACTION:   | : High Medium X Low  |
|  |  |
| RECOMMENDATIONS  |  |
| Groundwater monitoring by  | local agencies should be continued. e EPA at this time.  |
| No recommended role for the  | e EPA at this time.  |
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| POTENTIAL HAZA PRELIMINAR PART 1 - SITE INFORMA   | Y ASSE              | SSMENT                   |                              | I. IDENTIFIC<br>01 STATE 02<br>NY |                      |      |
|---|---------------------|--------------------------|------------------------------|-----------------------------------|----------------------|------|
| II. SITE NAME AND LOCATION  |                     |                          |                              | ·                                 | <del></del>          |      |
| 01 SITE NAME (Legal, common, or descriptive name of site)   |                     |                          | OR SPECIFIC LOCATION         | IDENTIFIER                        |                      | ·    |
| Babylon Landfill  | E                   | dison Av                 | e.                           |                                   |                      |      |
| 03 CITY   | 04 STAT             | E 05 ZIP CODE            | 08 COUNTY                    |                                   | 07COUNTY             |      |
| Dalas I on  | NY                  | 11702                    | Suffolk                      |                                   | CODE                 | DIST |
| Babylon 09 COORDINATES LATITUDE LONGITUDE   | +                   |                          | <del>.l</del>                | · · ·                             | 1103                 | 02   |
| 40° 43' 33 .5" W   073° 22' 40 .0"N   |                     |                          | green and the second         |                                   |                      |      |
| 10 DIRECTIONS TO SITE (Starting from nearest public road)   | <del></del>         |                          |                              |                                   |                      |      |
| Southern State Parkway to Straight Path   | exit                | north at                 | Edison Ave                   |                                   | ·<br>·               |      |
| III. RESPONSIBLE PARTIES  |                     |                          |                              |                                   |                      |      |
| 01 OWNER (If known)   | 02 STRE             | ET (Business, mailing.   | , residential)               | <del></del> ;**                   |                      |      |
| Town of Babylon   | 1. 20               | 00 E. Sun                | rise Hwy.                    |                                   |                      |      |
| 03 CITY   | 04 STAT             | E 05 ZIP CODE            | 06 TELEPHONE                 | NUMBER                            |                      |      |
| Babylon   | NY                  | 11757                    | (516) 957                    | -3000                             |                      |      |
| 07 OPERATOR (Il known and different from owner)   | 08 STRE             | ET (Business, mailing)   |                              | 3000                              |                      |      |
|   |                     |                          | , ,                          |                                   |                      |      |
| 09 CITY   | 10 STATE            | E 11 ZIP CODE            | 12 TELEPHONE                 | NUMBER                            |                      |      |
| 13 TYPE OF OWNERSHIP (Check one)  A. PRIVATE B. FEDERAL:  (Agency name)                                     |                     | 🗆 C. STA                 | TE D.COUNTY                  | ☐ E. MUN                          | ICIPAL .             |      |
| □ F. OTHER:   |                     | G. UNH                   | (NOWN                        |                                   |                      |      |
| (Specify)  14 OWNER/OPERATOR NOTIFICATION ON FILE (Check all that apply)  NONE ON                           | £116                |                          | <del></del>                  |                                   |                      |      |
|   | LED WAS             | TE SITE (CERCLA 1        | 03 c) DATE RECEIVE           | D: /                              | □ C                  | NONE |
| IV. CHARACTERIZATION OF POTENTIAL HAZARD  |                     |                          |                              |                                   |                      |      |
| OT ON SITE INSPECTION   | ICIAL               | C F. OTHER:              |                              | D. OTHER C                        | ONTRACTOR            |      |
| 02 SITE STATUS (Check one) 03 YEARS OF OPER   |                     |                          |                              |                                   |                      |      |
| ☑ A. ACTIVE ☐ B. INACTIVE ☐ C. UNKNOWN  | 1940<br>BEGINNING Y |                          | iVe (                        | □ UNKNOWN                         |                      |      |
| 04 DESCRIPTION OF SUBSTANCES POSSIBLY PRESENT, KNOWN, OR ALLEGED  | - 1                 |                          |                              |                                   |                      |      |
| Municipal refuse, septic sludges from r   | eside               | ntial, $\infty$          | mmercial ar                  | nd indus                          | trial                |      |
| sources.  |                     |                          |                              |                                   |                      |      |
| 05 DESCRIPTION OF POTENTIAL HAZARD TO ENVIRONMENT AND/OR POPULATION Groundwater contamination in a sole sou | rce a               | quifer re                | gion.                        |                                   |                      |      |
|   |                     |                          |                              |                                   |                      |      |
| V. PRIORITY ASSESSMENT  | 1.15                | ·                        |                              |                                   | · <del>- · ·</del> · | . 7. |
| 01 PRIORITY FOR INSPECTION (Check one. If high or medium is checked, complete Part 2'- Waste Info           | rmation and P       | art 3 - Description of H | azardous Conditions and Inci | identsi                           | <del></del>          |      |
| ☐ A. HIGH ☐ B. MEDIUM ☐ C. LOW (Inspection required promptly) (Inspect on lim.                              |                     | D. NO                    |                              |                                   | n (orm)              |      |

O2 OF (Agency/Organization)

05 AGENCY

USEPA, Region II, Edison, NJ

06 ORGANIZATION

NUS CORP.

03 TELEPHONE NUMBER 201 ) 321–6685

08 DATE

07 TELEPHONE NUMBER

201 ) 225-6160

01 CONTACT

VI. INFORMATION AVAILABLE FROM

Mark Haulenbeek

04 PERSON RESPONSIBLE FOR ASSESSMENT

Edward F. McTiernan

| • | <b>-</b> |           |
|---|----------|-----------|
|   |          | $P\Delta$ |
|   |          |           |

| I. IDENT | IFICATION      |  |
|----------|----------------|--|
| 01 STATE | 02 SITE NUMBER |  |

| II. WASTES  | TATES, QUANTITIES, A   | ND CHARACTE                                  | RISTICS  | '                  |  |   |                                       |
|-------------|--|--|--|--------------------|--|---|---------------------------------------|
|             | STATES (Check all that apply)  D E. SLURRY ER, FINES D F. LIQUID | 02 WASTE QUAN<br>(Measures<br>must b<br>TONS | TITY AT SITE of waste quantities e independents    | 03 WASTE CHARACT   | DE. SO   | DEUBLE ZI I, HIGHLY FECTIOUS II J. EXPLOS AMMABLE II K. REACT | SIVE<br>IVE                           |
| L) D. OTHER |  | CUBIC YARDS                                  | unknown  | D D. PERSIS        | STENT II H. IGI                                  | NITABLE DIL INCOM   |                                       |
| III. WASTE  |  | 1 no.er broms                                |  | 1                  | <del> </del>                                     |   |                                       |
| CATEGORY    | SUBSTANCE  | NAME   | Tor coose mount                                    | 02 UNIT OF MEASURE |  | ·   |                                       |
| SLU         | SLUDGE   | YAME   | Unknown  | UZ ONLY OF MEASONE | ·  | formerly rece   | bozi                                  |
| OLW         | OILY WASTE   | <del></del>                                  | CIECIOWII  |                    |  | sludges   | 1700                                  |
| SOL         | SOLVENTS   | <del></del>                                  |  |                    | DOPULO   | Diages  |                                       |
| PSD         | PESTICIDES   | <del>-</del>                                 | <del> </del>                                       |                    |  |   | · · · · · · · · · · · · · · · · · · · |
| occ         | OTHER ORGANIC C  | HEMICALS                                     |  |                    |  | <u></u>   |                                       |
| 100         | INORGANIC CHEMIC   | <del></del>                                  |  |                    | <u> </u>   | <u> </u>  | <del></del>                           |
| ACD         | ACIDS  | , ALS  |  |                    |  |   |                                       |
| BAS         | BASES  |  | · <del>  · · · · · · · · · · · · · · · · · ·</del> | <del> </del>       |  |   |                                       |
| MES         | HEAVY METALS   |  | <del>                                     </del>   |                    | <u> </u>   | · · · · · · · · · · · · · · · · · · ·                         | <del></del>                           |
|             | OUS SUBSTANCES (500 A  |  | 1  | 1                  | <u> </u>   |   |                                       |
| O1 CATEGORY | 02 SUBSTANCE N   |  | 03 CAS NUMBER                                      | 04 STORAGE/DIS     | DOCAL METHOD                                     | 05 CONCENTRATION  | 06 MEASURE OF                         |
|             |  | ·  | US CAS NUMBER                                      | -                  | POSALMETHOD                                      | US CONCENTRATION  | CONCENTRATIO                          |
| SLU         | Septic Slude   | es   | -  | SI                 |  |   |                                       |
|             |  |  | -  |                    |  |   | <del> </del>                          |
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|             |  |  | gree.  | 1                  |  |   |                                       |
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|             |  |  |  |                    |  |   |                                       |
|             |  |  |  | 1 1                |  |   |                                       |
| V. FEEDSTO  | CKS (See Appendix for CAS Numb                                   |  | <u> </u>   | L                  | <del>-                                    </del> | <u> </u>  | l                                     |
| CATEGORY    | 01 FEEDSTOC  |  | 02 CAS NUMBER                                      | CATEGORY           | O1 FEFOS   | TOCK NAME   | 02 CAS NUMBER                         |
|             |  | <del></del>                                  | 02 070 (100000211                                  |                    | ***************************************          | , continue  | OE ONS HOMBER                         |
| FDS         | Not applic   | apte   |  | FDS                | ·<br><del></del>                                 |   | <del> </del>                          |
| FDS         |  |  | ļ  | FDS                |  |   |                                       |
| FDS         |  | ·  | <del> </del>                                       | FDS                | <del></del>                                      |   | <del></del>                           |
| FDS         |  |  | 1  | FDS                |  |   |                                       |
| I. SOURCES  | OF INFORMATION (CH.  | specific references, e.g.                    | , state lifes, sample analysis, r                  | oports)            |  |   | <del> </del>                          |
| N           | New York State   | DEC Region                                   | n I files  | •                  | • .  |   |                                       |

## **\$EPA**

## POTENTIAL HAZARDOUS WASTE SITE PRELIMINARY ASSESSMENT

|          | IFICATION      | • |
|----------|----------------|---|
| O1 STATE | 02 SITE NUMBER |   |

| PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS  |
|---|
| II. HAZARDOUS CONDITIONS AND INCIDENTS (Continued)  |
| 01 🗆 J. DAMAGE TO FLORA 02 🗀 OBSERVED (DATE:) 🗆 POTENTIAL 🗆 ALLEGED 04 NARRATIVE DESCRIPTION  |
| No potential exists due to extensive development in the vicinity of the site.   |
| 01 & K. DAMAGE TO FAUNA 04 NARRATIVE DESCRIPTION (Include name(s) of species)  Contaminants which enter surface waters may impact aquatic fauna in Satapogue Creek and the Great South Bay.   |
| 01 区L. CONTAMINATION OF FOOD CHAIN 02 ① OBSERVED (DATE:) 巻 POTENTIAL ① ALLEGED 04 NARRATIVE DESCRIPTION   |
| Contaminants which enter surface waters may eventually impact food chains.  |
| 01 M. UNSTABLE CONTAINMENT OF WASTES (Spitts/Plunoft/Standing liquids, Leaking drums) 03 POPULATION POTENTIALLY AFFECTED: 5,000 04 NARRATIVE DESCRIPTION  |
| Improper daily cover procedures result in exposure of refuse, numerous leachate seeps and refuse being blown about the site.  |
| 01 & N. DAMAGE TO OFFSITE PROPERTY 02 & OBSERVED (DATE: 4/83)   |
| 01 O. CONTAMINATION OF SEWERS, STORM DRAINS, WWTPs 02 OBSERVED (DATE:) DOTENTIAL ALLEGED 04 NARRATIVE DESCRIPTION   |
| No potential exists.  |
| 01 & P. ILLEGAL/UNAUTHORIZED DUMPING 02 & OBSERVED (DATE: 4/83 ) CI POTENTIAL TO ALLEGED 04 NARRATIVE DESCRIPTION   |
| Although the site is fenced it appears that refuse is often illegally dumped while the facility is closed.  |
| OS DESCRIPTION OF ANY OTHER KNOWN, POTENTIAL OR ALLEGED HAZARDS  Prior to the opening of the Southwest Sewer District in 1981, the landfill receive septic wastes from scavengers serving residential, commercial and industrial clients. |
| III. TOTAL POPULATION POTENTIALLY AFFECTED: 250,000   |
| IV. COMMENTS  |
|   |
| V. SOURCES OF INFORMATION (Cite specific references, e.g., state files, sample analysis, reports)   |
| Site Inspection  Babylon Landfill Monitroing Program 1981-1982 Completion Report by Geraghty  & Miller Inc. Suffolk County Health Dept files Farmingdale, NY  |

| I. IDENTIFICATION |                |  |  |  |
|-------------------|----------------|--|--|--|
| 01 STATE          | 02 SITE NUMBER |  |  |  |
| NTC               | 1              |  |  |  |

| SEPA   |   | INARY ASSESSMENT AZARDOUS CONDITIONS AND IN   | ICIDENTS                | NY NY                | THE NUMBER       |
|--|---|---|-------------------------|----------------------|------------------|
| II. HAZARDOUS CONDITI  | ONE AND INCIDENTS   |   |                         | <del></del>          |                  |
| 01 & A. GROUNDWATER<br>03 POPULATION POTENTI<br>An extensive<br>the early 19 | contamination 250,000 ally affected 250,000 leachate plume eman 70s. This plume has ifer with dissolved | o2 & OBSERVED (DATE: 1974  o4 NARRATIVE DESCRIPTION ating from the landfil resulted in contamina solids, chlorides, org | l has been tion of l    | both the             | shallow          |
|  | CONTAMINATION 10,000  | 02 O OBSERVED (DATE:  | ) &                     | POTENTIAL            | D ALLEGED        |
| Satapogue Cr<br>as a result  | eek begins approxima<br>of subsurface migrat  | tely 2 miles south of ion of contaminants fr  | the site<br>om the la   | and may<br>andfill.  | be impacted      |
| 01 M.C. CONTAMINATION<br>03 POPULATION POTENTI                               | OF AIR<br>ALLY AFFECTED: 10,000   | 02 M OBSERVED (DATE: 1979<br>04 NARRATIVE DESCRIPTION   | )                       | POTENTIAL            | ☐ ALLEGED        |
| Methane gene   | ration from the land  | fill has resulted in l  | ocal air                | quality              | problems.        |
| 01 (X D. FIRE/EXPLOSIVE OF OR POPULATION POTENTIAL                           |   | 02 D OBSERVED (DATE:  |                         | POTENTIAL            | D ALLEGED        |
| Poor houseke<br>in potential   | eping practices and<br>fire/explosive cond  | improper or insufficie itiens.  | nt use o                | f daily (            | cover result     |
| 01 DE. DIRECT CONTACT  |   | 02 OBSERVED (DATE:  | ) 01                    | POTENTIAL            | ☐ ALLEGED        |
|  | exists for direct cral population.  | ontact with hazardous   | material                | in the :             | landfill         |
| 01 LXF. CONTAMINATION<br>03 AREA POTENTIALLY AF                              |   | 02 BOBSERVED (DATE: 4/83  | ) 01                    | POTEŅTIAL            | ☐ ALLEGED        |
|  | ite has bëën extensi  | vely filled. Leachate   | seeps w                 | ere obse             | rved             |
|  |   |   |                         |                      |                  |
| 0120 G. DRINKING WATER OF POPULATION POTENTIA                                | LLY AFFECTED:250,000  | 02 学OBSERVED (DATE:   |                         | POTENTIAL            | ☐ ALLEGED        |
| Contamination extension of   | n of groundwater has<br>public supply syste   | resulted in closure oms and relocation of p   | f numerou<br>public sup | us priva<br>pply wel | te wells,<br>ls. |
|  |   |   |                         |                      |                  |
| 01 H. WORKER EXPOSE<br>03 WORKERS POTENTIAL                                  |   | 02 CI OBSERVED (DATE:   | ) DF                    | OTENTIAL             | D ALLEGED        |
| No reported  | history   |   |                         |                      | : .              |
|  |   |   |                         | •                    |                  |
| 01 201, POPULATION EXPO-<br>03 POPULATION POTENTIA                           | LLY AFFECTED: 250,000   | 02 CJ OBSERVED (DATE:   | -                       | POTENTIAL.           | ☐ ALLEGED        |
| Contaminants populations.  | which enter the gro   | undwater supply have t  | he poten                | tial to              | impact large     |
|  |   |   | •                       |                      | . •              |

### **SEPA**

### POTENTIAL HAZARDOUS WASTE SITE SITE INSPECTION REPORT

I. IDENTIFICATION

01 STATE | 02 SITE NUMBER

NY NEW

| ALIA  | PART 1 - SITE                           | LOCATION AND I                             |                            | RMATION NY                            | NEW                               |
|---|---|--|----------------------------|---------------------------------------|-----------------------------------|
| II. SITE NAME AND LOC                           |   |  |                            | · · · · · · · · · · · · · · · · · · · |                                   |
| O1 SITE NAME (Legal, common, o                  | r descriptive name of site)             | 0  |                            | R SPECIFIC LOCATION IDENTIFIER        |                                   |
| Babylon Land                                    | lfill                                   |  | Edison Ave.                | ·                                     |                                   |
| 03 CITY   |   | . 0  | 4 STATE 05 ZIP CODE        | 06 COUNTY                             | 07COUNTY 08 CONG<br>CODE DIST     |
| Babylon   | · · · · · · · · · · · · · · · · · · ·   |  | NY 11702                   | Suffolk                               | 103 02                            |
| OP COORDINATES W<br>LATITUDE W<br>40° 43' 33.5" | 073 LONGITUDE N<br>22'40 0"             | 10 TYPE OF OWNERSHIP  A. PRIVATE  F. OTHER |                            | C. STATE D. COUNT                     |                                   |
| III. INSPECTION INFORM                          | MATION                                  |  |                            |                                       |                                   |
| 01 DATE OF INSPECTION                           | 02 SITE STATUS                          | 03 YEARS OF OPERATIO                       | ,                          |                                       |                                   |
| 4 /13 / 83<br>MONTH DAY YEAR                    | □ INACTIVE                              |  | <u>1940   activ</u>        | <del></del>                           | ·                                 |
| 04 AGENCY PERFORMING INS                        |   |  | ING TEAM ENDING            | CAN                                   |                                   |
| □ A. EPA 🔯 B. EPA C                             | CONTRACTOR NUS COTTO                    | oration (                                  | C. MUNICIPAL [] [          | D. MUNICIPAL CONTRACTOR _             |                                   |
| □ E. STATE □ F. STATE                           | CONTRACTOR                              | ame of firm)<br>: [                        | G. OTHER                   | · ·                                   | (Name of firm)                    |
| 05 CHIEF INSPECTOR                              | (No                                     | ame of firm) O6 TITLE                      | -                          | (Specify) 07 ORGANIZATION             | 08 TELEPHONE NO.                  |
| `   | -Ti o-mon                               | Ecologist                                  |                            | NUS                                   | (201225-6160                      |
| Edward F. Mc                                    | riernan                                 | _1   |                            |                                       |                                   |
| 09 OTHER INSPECTORS                             | 11                                      | 10 TITLE                                   | ntal Scientis              | 11 ORGANIZATION ST NUS                | 12 TELEPHONE NO.<br>201) 225-6160 |
| Martin O'Nei                                    |   | FILATIONNE                                 |                            | SC INUS                               | 201)223-0100                      |
| Mike Kramer                                     |   | Environmen                                 | ntal Scientis              | st NUS                                | 201,225-6160                      |
|   |   |  |                            |                                       | ( )                               |
| ·   |   |  |                            |                                       | ( )                               |
|   |   |  |                            |                                       | ( )                               |
| 13 SITE REPRESENTATIVES IN                      | TERVIEWED                               | 14 TITLE Deputy                            | 15ADDRESS                  |                                       | 16 TELEPHONE NO                   |
| Walter Lindl                                    | .ey                                     | Commission                                 | er Babylon                 | n Landfill                            | 516) 957-3000                     |
|   |   |  | Edison                     | Δικο                                  |                                   |
|   |   |  | Babylor                    |                                       | ( )                               |
|   |   |  |                            |                                       | ( )                               |
|   |   |  |                            |                                       | ( )                               |
|   | · · · · · · · · · · · · · · · · · · ·   | -  |                            |                                       | , ,                               |
| '   | ·                                       |  |                            |                                       | ( )                               |
| ·   |   |  |                            |                                       | ( )                               |
|   | , • • • • • • • • • • • • • • • • • • • |  |                            |                                       |                                   |
| 17 ACCESS GAINED BY<br>(Check one)              | 18 TIME OF INSPECTION                   | 19 WEATHER CONDITIO                        | _                          | <del></del>                           |                                   |
| Ø PERMISSION ☐ WARRANT                          | 1:30 pm                                 | Sunny mi                                   | ld 50 <sup>0</sup> F winds | s from the SW                         |                                   |
| IV. INFORMATION AVAIL                           | LABLE FROM                              |  |                            | <u> </u>                              |                                   |
| 01 CONTACT                                      |   | 02 OF (Agency/Organization                 |                            |                                       | 03 TELEPHONE NO.                  |
| Mark Haulenk                                    | œek                                     | USEPA Reg                                  | ion II, Ediso              | on, NJ                                | 201 ,321–6685                     |
| 04 PERSON RESPONSIBLE FO                        | R SITE INSPECTION FORM                  | 05 AGENCY                                  | 06 ORGANIZATION            | 07 TELEPHONE NO.                      | 08 DATE                           |
| Edward F. Mc                                    | cTiernan                                | ] [  | NUS Corp.                  | (201) 225–6160                        | 4 , 20, 83                        |

| _ | PL |   |
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| ı   | I. IDENT | IFICATION      |
|-----|----------|----------------|
| ļ   | 01 STATE | 02 SITE NUMBER |
| - 1 | I NIY    |                |

| ₩ El   | PA   |                           |   | TION REPORT<br>E INFORMATION  | ·<br>!. :                                   | NY NY  | NUMBER                      |
|--|--|---------------------------|---|---|---|--|-----------------------------|
| II. WASTE S  | TATES, QUANTITIES, AN  | ID CHARACTER              | ISTICS  |   |   | •  | •                           |
| 01 PHYSICAL S  XI A. SOLID  B. POWDE  XI C. SLUDGE | TATES (Check at that apply)  □ E. SLURRY  R. FINES □ F. LIQUID  E □ G. GAS | 02 WASTE QUANTI           | ITY AT SITE  If waste quantities independenty | 03 WASTE CHARACTO  S A. TOXIC  □ B. CORRO  □ C. RADIOA  □ D. PERSIS | ☐ E SOLL<br>SIVE ☐ F INFE<br>CTIVE ☐ G FLAN | UBLE XI I. HIGHLY CTIOUS ID J. EXPLOS            | SIVE<br>IVE<br>PATIBLE      |
| ☐ D. OTHER   | (Specify)  | NO. OF DRUMS              | <del> </del>                                  |   |   | ي  |                             |
| III. WASTE T                                       | YPE  |                           |   |   |   |  | Secure section 1            |
| CATEGORY   | SUBSTANCE N  | IAME                      | 01 GROSS AMOUNT                               | 02 UNIT OF MEASURE  |   |  |                             |
| SLU  | SLUDGE   |                           | Unknown                                       |   |   | ormerly rece                                     | ived                        |
| OLW  | OILY WASTE   |                           |   |   | septic s                                    | ludges   |                             |
| SOL  | SOLVENTS   |                           |   | ,   |   |  |                             |
| PSD  | PESTICIDES   |                           |   |   |   | · · · · · · · · · · · · · · · · · · ·            |                             |
| occ  | OTHER ORGANIC CH   | HEMICALS                  |   |   |   |  |                             |
| IOC  | INORGANIC CHEMIC   | ALS                       |   |   |   |  |                             |
| ACD  | ACIDS  |                           |   |   |   |  |                             |
| BAS  | BASES  | * · · <del>**</del>       |   |   |   |  |                             |
| MES  | HEAVY METALS   |                           |   |   |   |  |                             |
| IV. HAZARD   | OUS SUBSTANCES (See Ap   | pendix for most frequent  | ly cited CAS Numbers)                         | **  |   |  |                             |
| 01 CATEGORY  | 02 SUBSTANCE N   | AME .                     | 03 CAS NUMBER                                 | 04 STORAGE/DISF   | POSAL METHOD                                | 05 CONCENTRATION                                 | 06 MEASURE OF CONCENTRATION |
| SLU  | Septic Sludg   | res                       |   | SI  |   |  |                             |
|  |  |                           |   |   |   |  |                             |
|  |  | <del>- 1 </del>           |   | <del></del>   |   |  | - 26 - 1 - 1                |
|  |  |                           |   |   |   |  |                             |
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|  |  |                           | Y .   |   | ·   |  |                             |
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|  | ······································                                     | <del> </del>              |   |   |   |  | <u> </u>                    |
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|  |  |                           |   |   |   | <u> </u>   | L                           |
| V. FEEDSTO   | CKS (See Appendix for CAS Number   | ers)                      | `   |   | · ·   |  |                             |
| CATEGORY   | 01 FEEDSTOC  | K NAME                    | 02 CAS NUMBER                                 | CATEGORY  | 01 FEEDST                                   | OCK NAME   | 02 CAS NUMBER               |
| FDS  | Not applic   | able                      |   | FDS   |   |  |                             |
| FDS  |  |                           |   | FDS   |   |  |                             |
| FDS  | •  |                           |   | FDS   |   |  | <del></del>                 |
| FDS  |  |                           |   | FDS   |   | <u> </u>   |                             |
| VI. SOURCES  | S OF INFORMATION (Cno.   | specific references, e.a. | state files, sample analysis r                | L   |   |  |                             |
|  | New York State   |                           | 1   | · · · · · · · · · · · · · · · · · · ·                               |   |  |                             |

| I. IDENT | IFICATION      |  |
|----------|----------------|--|
| 01 STATE | 02 SITE NUMBER |  |
| NY       |                |  |

| DART 3 - DESCRIPTION OF I  | HAZARDOUS CONDITIONS AND INCIDENTS   | NY   |
|--|--|--|
|  | TAZANDOUS CONDITIONS AND INCIDENTS   | <u> </u>   |
| II. HAZARDOUS CONDITIONS AND INCIDENTS   |  |  |
| on the early 1970s. This plume has and deep aquifer with dissolved organic compounds.  | 04 NARRATIVE DESCRIPTION<br>nating from the landfill has be<br>s resulted in contamination of  | both the shallow   |
| 01 DXB. SURFACE WATER CONTAMINATION 03 POPULATION POTENTIALLY AFFECTED: 10,000   | 02 □ OBSERVED (OATE:)   O4 NARRATIVE DESCRIPTION   | POTENTIAL   ALLEGED  |
| Satapogue Creek begins approximate as a result of subsurface migrat  | ately 2 miles south of the site  | and may be impacted andfill.   |
| 01 🛭 C. CONTAMINATION OF AIR 03 POPULATION POTENTIALLY AFFECTED: 10,000  | 02 ⊠ OBSERVED (DATE: 1979 ) □ 04 NARRATIVE DESCRIPTION   | POTENTIAL   ALLEGED  |
| Methane generation from the land   | ·  | quality problems.  |
| 01 (X.D. FIRE/EXPLOSIVE CONDITIONS 03 POPULATION POTENTIALLY AFFECTED: 50  | 02 □ OBSERVED (DATE:)   O4 NARRATIVE DESCRIPTION   | POTENTIAL   ALLEGED  |
| Poor housekeeping practices and in potential fire/explosive cond   |  | of daily cover result  |
| 01 DE. DIRECT CONTACT 03 POPULATION POTENTIALLY AFFECTED:  | 02 ☐ OBSERVED (DATE:) ☐ 04 NARRATIVE DESCRIPTION   | POTENTIAL   ALLEGED  |
| OST OF SEATISTY OF EATHER FOR EATHER   | 04 MANNATIVE DESCRIPTION   |  |
| No potential exists for direct of for the general population.  | •  | in the landfill  |
| No potential exists for direct of for the general population.  O1 LXF CONTAMINATION OF SOIL O3 AREA POTENTIALLY AFFECTED.  82  | contact with hazardous material  02 ØOBSERVED (DATE: 4/83 )  | POTENTIAL ALLEGED  |
| No potential exists for direct of for the general population.  | contact with hazardous material  02 ØOBSERVED (DATE: 4/83 )  | POTENTIAL ALLEGED  |
| No potential exists for direct of for the general population.  O1 LXF CONTAMINATION OF SOIL O3 AREA POTENTIALLY AFFECTED.  82  | contact with hazardous material  02 ØOBSERVED (DATE: 4/83 )  | POTENTIAL ALLEGED  |
| No potential exists for direct of for the general population.  O1 LXF CONTAMINATION OF SOIL  O3 AREA POTENTIALLY AFFECTED:  The entire site has been extens:   | contact with hazardous material  02 ØOBSERVED (DATE: 4/83 )  | POTENTIAL ALLEGED  |
| No potential exists for direct of for the general population.  O1 LXF CONTAMINATION OF SOIL O3 AREA POTENTIALLY AFFECTED.  The entire site has been extense at the base of the fill.   | contact with hazardous material  02 ØOBSERVED (DATE: _4/83)  04 NARRATIVE DESCRIPTION  ively filled. Leachate seeps w  | potential 🗆 alleged<br>vere observed   |
| No potential exists for direct of for the general population.  O1 [XF CONTAMINATION OF SOIL 03 AREA POTENTIALLY AFFECTED 82 The entire site has been extensiat the base of the fill.   | 02 BOBSERVED (DATE: _4/83) OANARRATIVE DESCRIPTION ively filled. Leachate seeps w  | POTENTIAL ALLEGED  |
| No potential exists for direct of for the general population.  O1 [XF CONTAMINATION OF SOIL 03 AREA POTENTIALLY AFFECTED 82 The entire site has been extensiat the base of the fill.  O1 X G. DRINKING WATER CONTAMINATION 03 POPULATION POTENTIALLY AFFECTED 250,000  | O2 BOBSERVED (DATE: _4/83) O4 NARRATIVE DESCRIPTION ively filled. Leachate seeps w   | POTENTIAL ALLEGED  we're observed  POTENTIAL ALLEGED   |
| No potential exists for direct of for the general population.  O1 [XF CONTAMINATION OF SOIL 03 AREA POTENTIALLY AFFECTED 82 The entire site has been extensiat the base of the fill.   | O2 BOBSERVED (DATE: 4/83 ) O2 NARRATIVE DESCRIPTION ively filled. Leachate seeps work of NARRATIVE DESCRIPTION seems of numero seems with the control of numero seems | POTENTIAL ALLEGED  were observed  POTENTIAL ALLEGED  DUS private wells,                          |
| No potential exists for direct of for the general population.  O1 [XF CONTAMINATION OF SOIL O3 AREA POTENTIALLY AFFECTED 82  The entire site has been extensiat the base of the fill.  O1X G. DRINKING WATER CONTAMINATION O3 POPULATION POTENTIALLY AFFECTED 250,000  Contamination of groundwater has  | O2 BOBSERVED (DATE: 4/83 ) O2 NARRATIVE DESCRIPTION ively filled. Leachate seeps work of NARRATIVE DESCRIPTION seems of numero seems with the control of numero seems | POTENTIAL ALLEGED  were observed  POTENTIAL ALLEGED  DUS private wells,                          |
| No potential exists for direct of for the general population.  O1 [XF CONTAMINATION OF SOIL O3 AREA POTENTIALLY AFFECTED 82  The entire site has been extensiat the base of the fill.  O1X G. DRINKING WATER CONTAMINATION O3 POPULATION POTENTIALLY AFFECTED 250,000  Contamination of groundwater has  | O2 BOBSERVED (DATE: 4/83 ) O2 NARRATIVE DESCRIPTION ively filled. Leachate seeps work of NARRATIVE DESCRIPTION seems and relocation of public sufficients.   | POTENTIAL ALLEGED  Were observed  POTENTIAL ALLEGED  DUS private wells,  Apply wells.            |
| No potential exists for direct of for the general population.  O1 [XF CONTAMINATION OF SOIL 03 AREA POTENTIALLY AFFECTED 82 The entire site has been extensiat the base of the fill.  O1 [X] G. DRINKING WATER CONTAMINATION 03 POPULATION POTENTIALLY AFFECTED 250,000 Contamination of groundwater has extension of public supply systems.   | O2 BOBSERVED (DATE: 4/83 ) O2 NARRATIVE DESCRIPTION ively filled. Leachate seeps work of NARRATIVE DESCRIPTION seems and relocation of public sufficients.   | POTENTIAL ALLEGED  were observed  POTENTIAL ALLEGED  DUS private wells,                          |
| No potential exists for direct of for the general population.  O1 [XF CONTAMINATION OF SOIL 03 AREA POTENTIALLY AFFECTED: 82 The entire site has been extension at the base of the fill.  O1X G DRINKING WATER CONTAMINATION 03 POPULATION POTENTIALLY AFFECTED: 250,000 Contamination of groundwater has extension of public supply systematically affected supply systematically su | O2 BOBSERVED (DATE: _4/83)  O4 NARRATIVE DESCRIPTION ively filled. Leachate seeps w  O2 BOBSERVED (DATE: _1979) O4 NARRATIVE DESCRIPTION s resulted in closure of numero ems and relocation of public su   | POTENTIAL ALLEGED  Were observed  POTENTIAL ALLEGED  DUS private wells,  Apply wells.            |
| No potential exists for direct of for the general population.  O1 (XF CONTAMINATION OF SOIL  O3 AREA POTENTIALLY AFFECTED  The entire site has been extensiat the base of the fill.  O1XI G. DRINKING WATER CONTAMINATION O3 POPULATION POTENTIALLY AFFECTED  COntamination of groundwater has extension of public supply system  O1 D H. WORKER EXPOSURE/INJURY O3 WORKERS POTENTIALLY AFFECTED:  | O2 BOBSERVED (DATE: _4/83)  O4 NARRATIVE DESCRIPTION ively filled. Leachate seeps w  O2 BOBSERVED (DATE: _1979) O4 NARRATIVE DESCRIPTION s resulted in closure of numero ems and relocation of public su   | POTENTIAL ALLEGED  Were observed  POTENTIAL ALLEGED  DUS private wells,  Apply wells.            |
| No potential exists for direct of for the general population.  O1 LXF CONTAMINATION OF SOIL  O3 AREA POTENTIALLY AFFECTED:  The entire site has been extensed the base of the fill.  O1XG DRINKING WATER CONTAMINATION O3 POPULATION POTENTIALLY AFFECTED:  Contamination of groundwater has extension of public supply systematically affected:  No reported history  O1XI POPULATION EXPOSURE/INJURY   | O2 BOBSERVED (DATE: 4/83 )  O4 NARRATIVE DESCRIPTION  ively filled. Leachate seeps w  O2 BOBSERVED (DATE: 1979 )  O4 NARRATIVE DESCRIPTION  s resulted in closure of numeronems and relocation of public su  O2 OBSERVED (DATE: 1979 )  O4 NARRATIVE DESCRIPTION   | POTENTIAL ALLEGED  Were observed  POTENTIAL ALLEGED  DUS private wells,  Apply wells.            |
| No potential exists for direct of for the general population.  01 LXF CONTAMINATION OF SOIL 03 AREA POTENTIALLY AFFECTED. 282 The entire site has been extense at the base of the fill.  01 X G. DRINKING WATER CONTAMINATION 03 POPULATION POTENTIALLY AFFECTED: 250,000 Contamination of groundwater has extension of public supply system 01 ID H. WORKER EXPOSURE/INJURY 03 WORKERS POTENTIALLY AFFECTED: No reported history  01 X I. POPULATION EXPOSURE/INJURY 03 POPULATION POTENTIALLY AFFECTED: 250,000  | O2 BOBSERVED (DATE: 4/83 )  O4 NARRATIVE DESCRIPTION  O2 BOBSERVED (DATE: 1979 )  O4 NARRATIVE DESCRIPTION  S resulted in closure of numeronems and relocation of public su  O2 DOBSERVED (DATE: )  O4 NARRATIVE DESCRIPTION  O4 NARRATIVE DESCRIPTION   | POTENTIAL ALLEGED  POTENTIAL ALLEGED  DUS private wells,  APPOTENTIAL ALLEGED  POTENTIAL ALLEGED |
| No potential exists for direct of for the general population.  O1 [XF CONTAMINATION OF SOIL 03 AREA POTENTIALLY AFFECTED 82  The entire site has been extensiat the base of the fill.  O1X G DRINKING WATER CONTAMINATION 03 POPULATION POTENTIALLY AFFECTED: 250,000  Contamination of groundwater has extension of public supply system  O1 ID H. WORKER EXPOSURE/INJURY 03 WORKERS POTENTIALLY AFFECTED: No reported history  O1 XO I. POPULATION EXPOSURE/INJURY 03 POPULATION POTENTIALLY AFFECTED: 250,000  Contaminants which enter the groundwater the groundwater of the groundwater of the groundwater has a contaminant to the contaminant of the con | O2 BOBSERVED (DATE: 4/83 )  O4 NARRATIVE DESCRIPTION  O2 BOBSERVED (DATE: 1979 )  O4 NARRATIVE DESCRIPTION  S resulted in closure of numeronems and relocation of public su  O2 DOBSERVED (DATE: )  O4 NARRATIVE DESCRIPTION  O4 NARRATIVE DESCRIPTION   | POTENTIAL ALLEGED  POTENTIAL ALLEGED  DUS private wells,  APPOTENTIAL ALLEGED  POTENTIAL ALLEGED |
| No potential exists for direct of for the general population.  01 LXF CONTAMINATION OF SOIL 03 AREA POTENTIALLY AFFECTED. 282 The entire site has been extense at the base of the fill.  01 X G. DRINKING WATER CONTAMINATION 03 POPULATION POTENTIALLY AFFECTED: 250,000 Contamination of groundwater has extension of public supply system 01 ID H. WORKER EXPOSURE/INJURY 03 WORKERS POTENTIALLY AFFECTED: No reported history  01 X I. POPULATION EXPOSURE/INJURY 03 POPULATION POTENTIALLY AFFECTED: 250,000  | O2 BOBSERVED (DATE: 4/83 )  O4 NARRATIVE DESCRIPTION  O2 BOBSERVED (DATE: 1979 )  O4 NARRATIVE DESCRIPTION  S resulted in closure of numeronems and relocation of public su  O2 DOBSERVED (DATE: )  O4 NARRATIVE DESCRIPTION  O4 NARRATIVE DESCRIPTION   | POTENTIAL ALLEGED  POTENTIAL ALLEGED  DUS private wells,  APPOTENTIAL ALLEGED  POTENTIAL ALLEGED |

### **SEPA**

## POTENTIAL HAZARDOUS WASTE SITE SITE INSPECTION REPORT

I. IDENTIFICATION

01 STATE 02 SITE NUMBER

| PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS   |
|--|
| II. HAZARDOUS CONDITIONS AND INCIDENTS (Continued)   |
| 01  J. DAMAGE TO FLORA 02  OBSERVED (DATE:)  POTENTIAL  ALLEGED 04 NARRATIVE DESCRIPTION   |
|  |
| No potential exists due to extensive development in the vicinity of the site.  |
| O1 🔀 K. DAMAGE TO FAUNA O2 🗆 OBSERVED (DATE:) 🛣 POTENTIAL 🗀 ALLEGED O4 NARRATIVE DESCRIPTION (Include name(s) of species)                                    |
| Contaminants which enter surface waters may impact aquatic fauna in Satapogue  |
| Creek and the Great South Bay.   |
| 01 登L. CONTAMINATION OF FOOD CHAIN 02 🗆 OBSERVED (DATE:  |
| 04 NARRATIVE DESCRIPTION   |
| Contaminants which enter surface waters may eventually impact food chains.   |
|  |
| 01 XM. UNSTABLE CONTAINMENT OF WASTES  (Spills/Runofit/Standing liquids, Leaking drums)  03 POPULATION POTENTIALLY AFFECTED: 5,000  04 NARRATIVE DESCRIPTION |
| Improper daily cover procedures result in exposure of refuse, numerous leachate  |
| seeps and refuse being blown about the site.   |
| 01 M N. DAMAGE TO OFFSITE PROPERTY 02 M OBSERVED (DATE: 4/83)   POTENTIAL  ALLEGED  ALLEGED  |
| Sheet erosion off the east face of the fill results in flooding on local streets.  |
| Also, methane generated from the fill has entered local buildings.   |
| 01   O. CONTAMINATION OF SEWERS, STORM DRAINS, WWTPs 02   OBSERVED (DATE:)   POTENTIAL   ALLEGED   O4 NARRATIVE DESCRIPTION                                  |
| No potoptial opiata  |
| No potential exists.   |
| 01 X P. ILLEGAL/UNAUTHORIZED DUMPING 02 X OBSERVED (DATE: 4/83 ) D POTENTIAL DALLEGED 04 NARRATIVE DESCRIPTION   |
| Although the site is fenced it appears that refuse is often illegally dumped   |
| while the facility is closed.  |
| 05 DESCRIPTION OF ANY OTHER KNOWN, POTENTIAL, OR ALLEGED HAZARDS   |
| Prior to the opening of the Southwest Sewer District in 1981, the landfill received  |
| septic wastes from scavengers serving residential, commericial and industrial clients.   |
|  |
| III. TOTAL POPULATION POTENTIALLY AFFECTED: 250,000  |
| IV. COMMENTS   |
|  |
|  |
|  |
| V. SOURCES OF INFORMATION (Cite specific references, e.g., state files, sample analysis, reports)  |
| Site Inspection Babylon Landfill Monitroing Program 1981-1982 Completion Report by Geraghty  |
| & Miller Inc.  |

| <b>\$EPA</b>  |                                   | SITE INSPECT                          |                                       |  | I. IDENTIFICATION 01 STATE O2 SITE NUMBER NY |
|---|-----------------------------------|---------------------------------------|---------------------------------------|--|--|
| II. PERMIT INFORMATION  |                                   |                                       |                                       |  |  |
| 01 TYPE OF PERMIT ISSUED<br>(Check all that apply)  | 02 PERMIT NUMBER                  | 03 DATE ISSUED                        | 04 EXPIRATION DATE                    | 05 COMMENTS  |  |
| A. NPDES  |                                   |                                       | ·                                     |  |  |
| □ B. UIC  |                                   |                                       |                                       |  |  |
| □ C. AIR  |                                   |                                       |                                       |  |  |
| D. RCRA   |                                   |                                       |                                       |  |  |
| ☐ E. RCRA INTERIM STATUS  |                                   |                                       | ,                                     |  | •  |
| F. SPCCPLAN   |                                   |                                       |                                       |  | ÷  |
| X G. STATE (Specify)  | Unknown                           | 1                                     | •                                     | Interim  | 360 permit                                   |
| ☐ H. LOCAL (Specify)  |                                   |                                       |                                       |  |  |
| ☐ I. OTHER (Specify)  |                                   | -                                     |                                       |  |  |
| [] J. NONE  |                                   |                                       |                                       |  |  |
| III, SITE DESCRIPTION   |                                   | · · · · · · · · · · · · · · · · · · · | 1                                     | <del> </del>   |  |
| B PILES C C DRUMS, ABOVE GROUND D TANK, ABOVE GROUND E TANK, BELOW GROUND ST LANDFILL G LANDFARM H OPEN DUMP 1 OTHER (Specify)  O7 COMMENTS The site is an 82 acre a waste water treatment closed in 1976 and the | t plant and a 1                   | ES CF.  AH.  Agoon for                | formerly l                            | ssing RY WARECOVERY Adfill Activit  and two intes. The | inclinerators were                           |
| 01 CONTAINMENT OF WASTES (Check one)  |                                   | <del></del>                           | · · · · · · · · · · · · · · · · · · · | ·  |  |
| ☐ A. ADEQUATE, SECURE   | ☐ B. MODERATE                     | ₩ C. INADEQL                          | ATE, POOR                             | O. INSECU  | IRE, UNSOUND, DANGEROUS                      |
| OZ DESCRIPTION OF DRUMS, DIKING, LINERS, E<br>Of the total 82 acres<br>material available ons   | only -5 acres a<br>site. There is | limited le                            | eachate col                           | There is   | limited cover<br>however a                   |
| passive methane ventin  | g system was ir                   | istalled ir                           | 1 1981.                               | •  |  |

VI. SOURCES OF INFORMATION (Cite specific references, e.g. state lifes, sample analysis, reports)

Interview with Walter Lindley, Deputy Commissioner Babylon Landfill, (516)957-3000 New York DEC Region I files Site Inspection

The site is fenced however it appears that the fence is incomplete.

| •  |                                    |                               |  |  |  |
|--|------------------------------------|-------------------------------|--|--|--|
| <b>\$EPA</b>   |                                    | SITE INSPEC                   | RDOUS WASTE SIT<br>TION REPORT<br>IC, AND ENVIRONM   |  | I. IDENTIFICATION O1 STATE 02 SITE NUMBER NY |
| II. DRINKING WATER SUPPLY  |                                    |                               |  |  |  |
| 01 TYPE OF DRINKING SUPPLY<br>(Check as applicable)<br>SURFACE   | WELL                               | 02 STATUS                     | ED AFFECTED I  | MONITORED                                    | 03 DISTANCE TO SITE                          |
| COMMUNITY A. D   | B. DX<br>D. □                      | A.X0<br>D. 🗆                  | 8. <b>X</b><br>E. Ü  | C. []X<br>F. []                              | A. <u>±1</u> (mi)<br>8(mi)                   |
| III. GROUNDWATER   |                                    | 3                             |  |  |  |
| 01 GROUNDWATER USE IN VICINITY (Check  | B. DRINKING (Other sources evellab | DUSTRIAL, IRRIGATIO           | (Limited other source  | INDUSTRIAL, IRRIGATI<br>ces evallable)       | ON D. NOT USED, UNUSEABLE                    |
| 02 POPULATION SERVED BY GROUND WA  | TER 250,000                        | -                             | 03 DISTANCE TO NEARES  | ST DRINKING WATER W                          | /ELL +1 (mi)                                 |
| 04 DEPTH TO GROUNDWATER  | 05 DIRECTION OF GRO                |                               | 06 DEPTH TO AQUIFER OF CONCERN ±115 (ft)   | 07 POTENTIAL YIELI<br>OF AQUIFER<br>> 25,000 | -  |
| There is an extens Landfill which uti of the site there There are several  | lizes approx<br>is a major S       | imately 30<br>uffolk Cit      | wells in the<br>y Water Autho<br>y wells south   | vicinity o                                   | of the site. North                           |
| O RECHARGE AREA  XYES COMMENTS This as  COMMENTS This as  COMMENTS THE ACCIONATE AND A |                                    |                               | 11 DISCHARGE AREA  PORT OF THE PROPERTY OF T | TS.  | endangered.                                  |
| 01 SURFACE WATER USE (Check one)   |                                    |                               |  |  | <del></del>                                  |
| [XA. RESERVOIR, RECREATION DRINKING WATER SOURCE   | B. IRRIGATION                      | N, ECONOMICALLY<br>TRESOURCES | C. COMMERCIA   | AL, INDUSTRIAL                               | ☐ D. NOT CURRENTLY USED                      |
| 02 AFFECTED/POTENTIALLY AFFECTED BO  | DDIES OF WATER                     | 4                             | , ig   |  | ,  |
| NAME:  | •                                  |                               |  | AFFECTED                                     | DISTANCE TO SITE                             |
| Satapogue Creek Amityville Creek Great South Bay   |                                    |                               |  | 5X<br>CI                                     | 1 (mi) 1.5 (mi) 2 (mi)                       |
| V. DEMOGRAPHIC AND PROPERTY  | YINFORMATION                       |                               |  |  |  |
| 01 TOTAL POPULATION WITHIN   |                                    |                               | 02   | DISTANCE TO NEARES                           | ST POPULATION                                |
|  | 0 (2) MILES OF SITE                |                               | B) MILES OF SITE   | · .  | 0.5 (mi)                                     |

OS POPULATION WITHIN VICINITY OF SITE (Provide narrative description of nature of population within vicinity of site, e.g., rural, village, densely populated urban area)

The site is located in a mixed use light industrial and residential portion of central Babylon. The Town of Babylon is one of the most densely developed areas in Suffolk County and has a total population of approximately 250,000.

04 DISTANCE TO NEAREST OFF-SITE BUILDING

03 NUMBER OF BUILDINGS WITHIN TWO (2) MILES OF SITE

| $\boldsymbol{\wedge}$ | P   | M |
|-----------------------|-----|---|
| . T.                  | LUI | 1 |
|                       |     | - |

EPA FORM 2070-13 (7-81)

## POTENTIAL HAZARDOUS WASTE SITE SITE INSPECTION REPORT

|   | I. IDENT | IFICATION      |
|---|----------|----------------|
|   | 01 STATE | 02 SITE NUMBER |
| i | NY       | , · ·          |

| VEPA  |  | C, AND ENVIRONMENTAL DATA  | NY  |
|---|--|--|---|
| VI. ENVIRONMENTAL INFORMA                                     | ATION  |  |   |
| 01 PERMEABILITY OF UNSATURATED Z                              | ONE (Check one)  |  |   |
| □ A. 10-6 – 10-   | <sup>6</sup> cm/sec ☐ B. 10 <sup>-4</sup> - 10 <sup>-6</sup> cm/sec ☐  | C. 10 <sup>-4</sup> - 10 <sup>-3</sup> cm/sec  | R THAN 10 <sup>-3</sup> cm/sec  |
| 02 PERMEABILITY OF BEDROCK (Check of                          | one)   |  |   |
| ☐ A. IMPERN<br>(Less than 1                                   | MEABLE 10-6 cm/sec) D. RELATIVELY IMPERMEAB  | C. RELATIVELY PERMEABLE (10 10 10 10 10 10 10 10 10 10 10 10 10 1  | D. VERY PERMEABLE<br>(Greater than 10 <sup>-2</sup> cm/sec)                 |
| 03 DEPTH TO BEDROCK   | 04 DEPTH OF CONTAMINATED SOIL ZONE   | 05 SOIL pH   |   |
| <u>+1300</u> (tt)   | Unknown (ft)   | 4.5 - 5.5  |   |
| 06 NET PRECIPITATION  | 07 ONE YEAR 24 HOUR RAINFALL   | 08 SLOPE 1 DIRECTION OF SITE   | SLOPE TERRAIN AVERAGE SLOPE   |
| ±23 (in)  | <u>+2.8</u> (in)   | Variable Varia   |   |
| 09 FLOOD POTENTIAL  | 10   | <u> </u>   | <del></del>   |
| SITE IS IN 100 YEAR FLO                                       | ODPLAIN  | R ISLAND, COASTAL HIGH HAZARD AREA   | A, RIVERINE FLOODWAY  |
| 11 DISTANCE TO WETLANDS (5 acre minima                        | um)  | 12 DISTANCE TO CRITICAL HABITAT (of endange  | red species)  |
| ESTUARINE   | OTHER  | · .  | (mi)  |
| A   | B. applicable  | ENDANGERED SPECIES: NO   | ne  |
| 13 LAND USE IN VICINITY                                       | U  | , ENDANGERED OF EGIES.   |   |
| DISTANCE TO:  |  |  |   |
|   | RESIDENTIAL AREAS; NATIO   | AL/STATE PARKS, AGE  | RICULTURAL LANDS  |
| COMMERCIAL/INDUSTR  | IAL FORESTS, OR WILDLIF  | RESERVES PRIME AG LA   | ND AG LAND  |
| _   | , or   | 0.25   | 0.25  |
| A <u>adjacent</u> (mi)  | B. <u>0.25</u>   | _(mi) C  | (mi) D (mi)   |
| These surface deposite aquifer is 10-13 fe aquifer called the | cre landfill approximate is are glacial in origin its form the upper glaciet of Gardiners Clay. I Magothy which is the mappy in the vicinity of the hardwoods and a remine | and about 90 feet thic<br>al aquifer in this are<br>elow the clay layer th<br>or source of potable w<br>he site is a generally | a. Beneath this ere is an artesian ater on Long Island.  flat coastal plain |
|   |  |  |   |
|   |  | · ·  |   |
|   |  |  |   |
| •   |  |  |   |
|   |  |  |   |
|   |  |  |   |
|   | 1 · · · · · · · · · · · · · · · · · · ·  |  |   |
| ,   |  |  |   |
|   |  |  |   |
| VII. SOURCES OF INFORMATION                                   | (Cite specific references, e.g., state files, sample analysis,   | ports)   |   |
| Long Island 208 stu<br>Babylon Landfill Mc<br>Site Inspection | udy - Long Island Region<br>onitoring Program 1981-1   | l Planning Board<br>82 Completion Report &   | by Geraghty & Miller,<br>Inc.   |
| •   |  |  |   |

| <b>\$EPA</b>                       |                                 | POTENTIAL HAZARDOUS WAS<br>SITE INSPECTION REPOR<br>ART 6 - SAMPLE AND FIELD INFO | RT                                       | I. IDENTIFIC.          |   |
|------------------------------------|---------------------------------|---|--|------------------------|---|
| II. SAMPLES TAKEN                  |                                 |   |  |                        |   |
| SAMPLE TYPE                        | 01 NUMBER OF<br>SAMPLES TAKEN   | 02 SAMPLES SENT TO  |  |                        | 03 ESTIMATED DATE<br>RESULTS AVAILABLE  |
| GROUNDWATER                        |                                 | No samples taken  |  |                        |   |
| SURFACE WATER                      |                                 |   |  |                        |   |
| WASTE                              |                                 |   |  |                        |   |
| AIR                                |                                 |   |  |                        | N .                                     |
| RUNOFF                             |                                 |   |  |                        |   |
| SPILL                              |                                 |   |  |                        |   |
| SOIL                               |                                 |   |  |                        | :                                       |
| VEGETATION                         |                                 |   |  |                        |   |
| OTHER                              |                                 |   |  |                        |   |
| III. FIELD MEASUREMENTS TA         | KEN                             |   |  |                        |   |
| on type Air Quality                |                                 | otoionizer (HNu) did no<br>kground l  | ot detect air o                          | contamina              | tion above                              |
| Air Quality                        | Organic Va<br>inants alt        | por Analyzer detected<br>hough specific identif                                   | several possilication was no             | ble organ<br>ot possib | <u>ic contam-</u><br>le                 |
|                                    |                                 |   |  |                        |   |
| IV. PHOTOGRAPHS AND MAPS           | •                               |   |  |                        |   |
| 01 TYPE 🛣 GROUND 🗆 AERIAL          |                                 | 02 IN CUSTODY OF Edward F. (Nam   | McTiernan of organization or individual) |                        |   |
| 03 MAPS 04 LOCATION Site □ NO Site |                                 | p and site map are att  | ached as Figu                            | res 1 &2.              | 7-30 7K 500                             |
| V. OTHER FIELD DATA COLLEC         | CTED (Provide narrative desc    | criptsin)   |  | • •                    |   |
| None                               |                                 |   |  |                        |   |
|                                    | •.                              |   |  |                        | المالية المستحدد المعاد الشارات المالية |
|                                    |                                 |   |  |                        |   |
| VI. SOURCES OF INFORMATION         | N (Cite specific relevances, e. | g., state files, sample analysis, reports)  |  |                        |   |

Site Inspection

|   |                | POT         | TENTIAL HAZA                     | RDOUS WASTE SITE                             | I. IDENTIFICATION |          |             |
|---|----------------|-------------|----------------------------------|--|-------------------|----------|-------------|
| <b>≎EPA</b>   |                |             |                                  | TION REPORT<br>R'INFORMATION                 | NY NY             | 2 SITE   | E NUMBER    |
| II. CURRENT OWNER(S)  |                |             |                                  | PARENT COMPANY (If applicable)               | <del></del>       |          | <u></u>     |
| on NAME<br>Town of Babylon                                    |                |             | D+B NUMBER<br>None               | OB NAME                                      |                   | 09 D     | +B NUMBER   |
| 03 STREET ADDRESS (P.O. BOX. RFD #. etc.) 200 E. Sunrise Hwy. |                | <b></b>     | o4 sic coodWot<br>applicable     | 10 STREET ADDRESS (P. O. Box, RFD #, etc.)   |                   |          | 11 SIC CODE |
| oschy<br>North Lindenhurst                                    | 06 STATE<br>NY |             | ZIP CODE<br>11757                | 12 CITY                                      | 13 STATE          | 14 Z     | IP CODE     |
| 01 NAME   | <u> </u>       | 02 0        | D+B NUMBER                       | 08 NAME                                      |                   | 09 D     | +B NUMBER   |
| 03 STREET ADDRESS (P.O. Box, RFD #, etc.)                     |                | 1           | 04 SIC CODE                      | 10 STREET ADDRESS (P.O. Box, RFD #, etc.)    |                   |          | 11 SIC CODE |
| 05 CITY   | 06 STATE       | 07 7        | ZIP CODE                         | 12 CITY                                      | 13 STATE          | 14 Z     | IP CODE     |
| 01 NAME   | 1              | 021         | D+B NUMBER                       | 08 NAME                                      |                   | 09 D     | + B NUMBER  |
| 03 STREET ADDRESS (P.O. Box, RFD #, etc.)                     |                | Щ.          | 04 SIC CODE                      | 10 STREET ADDRÉSS (P.O. Box, RFD #, etc.)    |                   |          | 11SIC CODE  |
| 05 CITY   | 06 STATE       | 07 Z        | ZIP CODE                         | 12 CITY                                      | 13 STATE          | 14 ZI    | IP CODE     |
| O1 NAME   |                | 02 0        | D+B NUMBER                       | OB NAME                                      |                   | 09 D     | +8 NUMBER   |
| 03 STREET ADDRESS (P.O. Box, RFD #, etc.)                     |                | <u>+</u>    | 04 SIC CODE                      | 10 STREET ADDRESS (P.O. Box, RFD #, etc.)    |                   |          | 11 SIC CODE |
| 05 CITY   | 06 STATE       | 07 7        | ZIP CODE                         | 12 CITY                                      | 13 STATE          | 14 Z     | IP CODE     |
| III. PREVIOUS OWNER(S):(List most recent first)               |                | Ц           | ·-··                             | IV. REALTY OWNER(S) (If applicable; list mos | t recent (irșt)   | <u> </u> |             |
| O1 NAME   |                | 02 C        | D+8 NUMBER                       | 01 NAME                                      |                   | 02 D     | +8 NUMBER   |
| 03 STREET ADDRESS (P. O. Box, RFD #, etc.)                    |                | 1           | 04 SIC CODE                      | 03 STREET ADDRESS (P.O. Box, RFD #, etc.)    |                   |          | 04 SIC CODE |
| 05 CITY   | OBSTATE        | 07 Z        | ZIP CODE                         | 05 CITY                                      | 06 STATE          | 07 Z     | IP CODE     |
| O1 NAME   | <u>L</u>       | 02 D        | D+B NUMBER                       | O1 NAME                                      |                   | 02 D     | O+B NUMBER  |
| 03 STREET ADDRESS (P.O. Box, RFD P. etc.)                     |                |             | 04 SIC CODE                      | 03 STREET ADDRESS (P.O. Box, RFD #, etc.)    |                   |          | 04 SIC CODE |
| 05 CITY   | 06 STATE       | 07 Z        | IP CODE                          | 05 CITY                                      | 06 STATE          | 07 ZI    | IP CODE     |
| O1 NAME   |                | 02 D        | D+8 NUMBER                       | O1 NAME                                      |                   | 02 D     | + B NUMBER  |
| 03 STREET ADDRESS (P.O. Bax, RFD #, etc.)                     |                |             | 04 SIC CODE                      | 03 STREET ADDRESS (P.O. Box, RFD #, etc.)    | l                 |          | 04 SIC CODE |
| OSCITY  | 06STATE        | 07          | ZIP CODE                         | 05 CITY                                      | 06 STATE          | 07 ZI    | PCODE       |
| V. SOURCES OF INFORMATION (Cite specific                      | ic references, | e.g., s     | state files, sample analysis, re | ports)                                       |                   |          |             |
|   |                | <del></del> |                                  |  |                   |          |             |
| Site Inspection   |                |             |                                  |  | ٠                 |          |             |
|   |                |             |                                  |  |                   |          |             |

| _ | _ |                |  |
|---|---|----------------|--|
|   |   | $\Box \Lambda$ |  |
|   |   |                |  |
|   |   |                |  |
|   |   |                |  |

### POTENTIAL HAZARDOUS WASTE SITE SITE INSPECTION REPORT

| I. IDENT       | IFICATION      |
|----------------|----------------|
| 01 STATE<br>NY | 02 SITE NUMBER |

| 7                                     |   |                             | PART 8 - OPERAT                       | OR INFORMATION                             | المتنت      |               |
|---------------------------------------|---|-----------------------------|---------------------------------------|--|-------------|---------------|
| II. CURRENT OPERATO                   | OR (Provide II different fro              | m owner)                    |                                       | OPERATOR'S PARENT COMPANY (#               | applicable) |               |
| oi name<br>Town of                    | f Babylon                                 |                             | 02 D+B NUMBER<br>None                 | 10 NAME                                    |             | 11.D+B NUMBER |
| 03 STREET ADDRESS (P.O. B             | 3ox, RFD €, etc.)                         |                             | 04 SIC CODE NOT                       | 12 STREET ADDRESS (P.O. Box, RFD #, etc.)  | <u> </u>    | 13 SIC CODE   |
| 200 E.                                | Sunrise Hwy                               | <b>y</b> , .                | applicable                            |  |             |               |
| 05 CITY                               |   | 06 STATE                    | 07 ZIP CODE                           | 14 CITY                                    | 15 STATE    | 16 ZIP CODE   |
| North I                               | Lindenhurst                               | NY                          | 11757                                 |  |             |               |
| 08 YEARS OF OPERATION<br>1940-present | 09 NAME OF OWNER                          |                             |                                       |  |             |               |
| III. PREVIOUS OPERAT                  | FOR(S) (List most recent for              | lirst; provide on           | nly if different from owner)          | PREVIOUS OPERATORS' PARENT CO              | MPANIES #   | applicable)   |
| 01 NAME                               |   |                             | 02 D+B NUMBER                         | 10 NAME                                    |             | 11 D+8 NUMBER |
| 03 STREET ADDRESS (P.O. B             | ox, RFD #, etc.)                          |                             | 04 SIC CODE                           | 12 STREET ADDRESS (P.O. Box, RFD #, etc.)  |             | 13 SIC CODE   |
| 05 CITY                               |   | 06 STATE                    | 07 ZIP CODE                           | 14 CITY                                    | 15 STATE    | 16 ZIP CODE   |
| 08 YEARS OF OPERATION                 | 09 NAME OF OWNER D                        | DURING THE                  | S PERIOD                              |  | <del></del> |               |
| 01 NAME                               |   |                             | 02 D+B NUMBER                         | 10 NAME:                                   |             | 11 D+B NUMBER |
| 03 STREET ADDRESS (Р.О. Во            | ıx, RFD #, etc.)                          |                             | 04 SIC CODE                           | 12 STREET ADDRESS (P.O. Box, RFD #, etc.)  |             | 13 SIC CODE   |
| 05 CITY                               |   | 06 STATE                    | 07 ZIP CODE                           | 14 CITY                                    | 15 STATE    | 16 ZIP CODE   |
| 08 YEARS OF OPERATION                 | 09 NAME OF OWNER                          | DURING THIS                 | SPERIOD                               |  |             | <u> </u>      |
| 01 NAME                               |   |                             | 02 D+B NUMBER                         | 10 NAME                                    |             | 11 D+B NUMBER |
| 03 STREET ADDRESS (P.O. Bo.           | )x, RFD #, elc.)                          |                             | 04 SIC CODE                           | 12 STREET ADDRESS (P. O. Box, RFD #, etc.) |             | 13 SIC CODE   |
|                                       | et en | Frankly (* 6 1000) kynneses | · · · · · · · · · · · · · · · · · · · | <u> </u>                                   |             |               |
| 05 CITY                               |   | OB STATE                    | 07 ZIP CODE                           | 14 CITY                                    | 15 STATE    | 16 ZIP CODE   |
| 08 YEARS OF OPERATION                 | 09 NAME OF OWNER                          | DURING THI                  | IS PERIOD                             |  |             |               |
| O TENNO DI CI CI CI                   | 0010002                                   | JU                          | J                                     |  |             | <u> </u>      |
| IV. SOURCES OF INFO                   | RMATION (Cite specific                    | ic references, e            | e.g., state files, sample analysis,   | reports)                                   |             |               |
|                                       | nspection                                 |                             |                                       |  |             |               |
|                                       | 7   | •                           |                                       | n  |             |               |
|                                       | · .                                       |                             |                                       |  |             | •             |
|                                       |   |                             |                                       |  | * •         |               |
|                                       |   |                             | •                                     |  |             |               |
|                                       | •   |                             |                                       |  |             |               |
|                                       |   |                             |                                       |  |             | •             |

|   | F               | POT          | ENTIAL HAZAI                    | RDOUS WASTE SIT           | E                 | I. IDENTIF        |                                       |
|---|-----------------|--------------|---------------------------------|---------------------------|-------------------|-------------------|---------------------------------------|
| <b>\$EPA</b>                              |                 |              | SITE INSPEC                     | TION REPORT               |                   | 01 STATE 02<br>NY | SITE NUMBER                           |
| II. ON-SITE GENERATOR                     | <del></del>     |              |                                 |                           |                   | · · · · ·         |                                       |
| Not applicable                            | ·               | 02.0         | O+8 NUMBER                      |                           |                   |                   |                                       |
| O3 STREET ADDRESS (P.O. Box, RFD #, etc.) |                 | <u> </u>     | 04 SIC CODE                     |                           |                   |                   |                                       |
| 05 CITY                                   | 06 STATE        | 07 2         | ZIP CODE                        |                           |                   |                   | ·                                     |
| III. OFF-SITE GENERATOR(S)                | <del>1</del>    | 1            | <u> </u>                        | <u> </u>                  | <del></del>       |                   |                                       |
| O1 NAME                                   | <del></del>     | 02 (         | O+B NUMBER                      | 01 NAME                   | •                 |                   | 02 D+B NUMBER                         |
|   |                 |              |                                 |                           | -,                |                   |                                       |
| 03 STREET ADDRESS (P.O. Box, RFD #, etc.) |                 | <del>1</del> | 04 SIC CODE                     | 03 STREET ADDRESS (P.O. 8 | Ox, RFD #, etc.)  |                   | 04 SIC CODE                           |
| 05 CITY                                   | 06 STATE        | 07 2         | I<br>ZIP CODE                   | 05 CITY                   |                   | 06 STATE          | 07 ZIP CODE                           |
| O1 NAME                                   |                 | 02 0         | )+B NUMBER                      | O1 NAME                   |                   | 1                 | 02 D+B NUMBER                         |
| O3 STREET ADDRESS (P.O. Box, RFD #, etc.) | <del></del>     | <u> </u>     | 04 SIC CODE                     | 03 STREET ADDRESS (P.O. E | Box. RFD #. etc.) | <del></del>       | 04 SIC CODE                           |
|   |                 |              |                                 |                           |                   |                   |                                       |
| 05 CITY                                   | 06 STATE        | 07 2         | I<br>ZIP CODE                   | 05 CITY                   |                   | 06 STATE          | 07 ZIP CODE                           |
| IV. TRANSPORTER(S)                        | .1              | L            |                                 |                           | <del></del>       | 1                 | <u> </u>                              |
| 01 NAME                                   |                 | 02 0         | )+B NUMBER                      | 0.1 NAME                  |                   |                   | 02 D+B NUMBER                         |
| · · · · · · · · · · · · · · · · · · ·     |                 |              |                                 |                           |                   |                   |                                       |
| O3 STREET ADDRESS (P.O. Box, RFO #, etc.) |                 |              | 04 SIC CODE                     | 03 STREET ADDRESS (P.O. B | ox, RFD #, etc.)  |                   | 04 SIC CODE                           |
| 05 CITY                                   | 06 STATE        | Ŏ7 Z         | IP CODE                         | 05 CITY                   |                   | 06 STATE          | 07 ZIP CODE                           |
| 01 NAME                                   | <u>l · </u>     | 02 0         | + B NUMBER                      | 01 NAME                   |                   | <u> </u>          | 02 D+8 NUMBER                         |
|   |                 | L            |                                 |                           |                   |                   | <u> </u>                              |
| 03 STREET ADDRESS (P.O. Box, RFD #, etc.) | •               |              | 04 SIC CODE                     | 03 STREET ADDRESS (P.O. 8 | lox; RFD #; etc.) |                   | 04 SIC CODE                           |
|   | Too or are      |              |                                 |                           |                   | loc exarc         | 07 ZIP CODE                           |
| 05 CITY                                   | 06 STATE        | 07 2         | CIP CODE                        | 05 CITY                   | · ,               | 06 STATE          | 07 ZIP CODE                           |
| V. SOURCES OF INFORMATION (Cite specific  | c references, o | e.g., st     | ate files, sample analysis, rej | ports)                    |                   |                   |                                       |
|   |                 |              |                                 |                           |                   |                   |                                       |
|   |                 |              |                                 |                           | •                 |                   | •                                     |
| · :                                       |                 |              |                                 |                           |                   |                   |                                       |
|   |                 |              |                                 |                           |                   |                   |                                       |
|   |                 |              |                                 |                           |                   |                   | · · · · · · · · · · · · · · · · · · · |
|   | •               |              |                                 |                           |                   |                   |                                       |
| :   |                 |              |                                 |                           |                   | :                 |                                       |

EPA FORM 2070-13 (7-81)

## **ŞEPA**

#### POTENTIAL HAZARDOUS WASTE SITE SITE INSPECTION REPORT PART 10 - PAST RESPONSE ACTIVITIES

|    | IDEN  |    |      |        |   |
|----|-------|----|------|--------|---|
| 01 | STATE | 02 | SITE | NUMBER | ì |
|    | NY    |    |      |        |   |

| ~ — · · ·  | PART 10 - PAST RESPONSE ACTIVITIES    |                                       | <u> </u>  |  |  |
|--|---------------------------------------|---------------------------------------|---|--|--|
| II. PAST RESPONSE ACTIVITIES   | 3.070                                 |                                       |   |  |  |
| 01 E A. WATER SUPPLY CLOSED<br>04 DESCRIPTION  | 02 DATE1979                           | 03 AGENCY _USC                        | S/Suffolk Cty<br>Health   |  |  |
| Several public and private w   |                                       | •                                     | contaminants  |  |  |
| 01 M B. TEMPORARY WATER SUPPLY PROVIDED  | 02 DATE 1980                          | 03 AGENCY TOY                         | vn of Babylon   |  |  |
| out of the four has ins  |                                       |                                       | treatment plant   |  |  |
| for 5 homes on Beaver Lane about 1 mile SE of the site.  01 M C. PERMANENT WATER SUPPLY PROVIDED  02 DATE 1979 03 AGENCY Suffolk Cty Water |                                       |                                       |   |  |  |
| 04 DESCRIPTION<br>Several private wells were r<br>the late 1970s.  |                                       |                                       | - Λuth  |  |  |
| 01 C D. SPILLED MATERIAL REMOVED   | 02 DATE                               | 03 AGENCY                             |   |  |  |
| 04 DESCRIPTION  Not applicable   |                                       | . '                                   |   |  |  |
| 01 C E. CONTAMINATED SOIL REMOVED  | 02 DATE                               | 03 AGENCY                             | <del></del>   |  |  |
| 04 DESCRIPTION   | UZ DATE                               | . US AGENCT                           |   |  |  |
| Not applicable   |                                       |                                       |   |  |  |
| 01 🗇 F. WASTE REPACKAGED<br>04 DESCRIPTION   | 02 DATE                               | 03 AGENCY                             |   |  |  |
| Not applicable   |                                       |                                       |   |  |  |
| 01 G. WASTE DISPOSED ELSEWHERE   | 02 DATE                               | 03 AGENCY                             |   |  |  |
| 04 DESCRIPTION   |                                       |                                       |   |  |  |
| Not applicable   |                                       | 22 40CNOV                             |   |  |  |
| 01 🗆 H. ON SITE BURIAL<br>04 DESCRIPTION   | 02 DATE                               | 03 AGENCY                             |   |  |  |
| Not applicable   |                                       |                                       |   |  |  |
| 01 (21. IN SITU CHEMICAL TREATMENT<br>04 DESCRIPTION   | 02 DATE                               | 03 AGENCY                             |   |  |  |
| Not applicable   |                                       |                                       | المنافقة الم |  |  |
| 01 🗇 J. IN SITU BIOLOGICAL TREATMENT<br>04 DESCRIPTION   | 02 DATE                               | 03 AGENCY                             |   |  |  |
| Not applicable   |                                       |                                       |   |  |  |
| 01 ☐ K. IN SITU PHYSICAL TREATMENT<br>04 DESCRIPTION   | O2 DATE                               | 03 AGENCY                             |   |  |  |
| Not applicable   |                                       |                                       |   |  |  |
| 01 □ L. ENCAPSULATION<br>04 DESCRIPTION  | 02 DATE                               | 03 AGENCY                             |   |  |  |
| Not applicable   |                                       |                                       |   |  |  |
| 01 DM. EMERGENCY WASTE TREATMENT   | 02 DATE                               | 03 AGENCY,                            |   |  |  |
| 04 DESCRIPTION   |                                       |                                       |   |  |  |
| Not applicable   |                                       | 00 105NOV                             | <del></del>   |  |  |
| 01 D N. CUTOFF WALLS<br>04 DESCRIPTION   | O2 DATE                               | 03 AGENCY                             |   |  |  |
| Not applicable   |                                       |                                       |   |  |  |
| 01 🗍 O. EMERGENCY DIKING/SURFACE WATER DI<br>04 DESCRIPTION  | DIVERSION 02 DATE                     | 03 AGENCY                             |   |  |  |
| Not applicable   | · · · · · · · · · · · · · · · · · · · |                                       |   |  |  |
| 01 P. CUTOFF TRENCHES/SUMP<br>04 DESCRIPTION   | 02 DATE                               | 03 AGENCY                             |   |  |  |
| Not applicable   |                                       | · · · · · · · · · · · · · · · · · · · | ,   |  |  |
| 01 🗆 Q. SUBSURFACE CUTOFF WALL<br>04 DESCRIPTION   | 02 DATE                               | 03 AGENCY                             |   |  |  |
| Not applicable   |                                       |                                       |   |  |  |

| <b>\$EPA</b>  | POTENTIAL HAZARDOUS WASTE SITE<br>SITE INSPECTION REPORT<br>PART 10 - PAST RESPONSE ACTIVITIES |                | I. IDENTIFICATION 11 STATE 02 SITE NUMBER NY |
|---|--|----------------|--|
| II PAST RESPONSE ACTIVITIES (Continued)                               |  |                |  |
| 01   R. BARRIER WALLS CONSTRUCTED  04 DESCRIPTION                     | 02 DATE  | 03 AGENCY _    |  |
| Not applicable  |  |                |  |
| 01 S. CAPPING/COVERING<br>04 DESCRIPTION                              | 02 DATE  | 03 AGENCY_     |  |
| Not applicable  |  |                |  |
| 01 T. BULK TANKAGE REPAIRED<br>04 DESCRIPTION                         | 02 DATE  | 03 AGENCY_     |  |
| Not applicable  |  | •              |  |
| 01 U. GROUT CURTAIN CONSTRUCTED<br>04 DESCRIPTION                     | 02 DATE  | 03 AGENCY_     |  |
| Not applicable  |  |                |  |
| 01 D V. BOTTOM SEALED<br>04 DESCRIPTION                               | 02 DATE  | 03 AGENCY_     |  |
| Not applicable  |  |                |  |
| 04 DESCRIPTION THE TOWN OF E  landfill to reduce  01   X FIRE CONTROL | Babylon installed a passive meth<br>gas collection in local buildin                            | gs.  O3 AGENCY |  |
| 04 DESCRIPTION  | UZ DATE  | US AGENCY_     |  |
| Not applicable  |  |                |  |
| 01 U.Y. LEACHATE TREATMENT<br>04 DESCRIPTION                          | 02 DATE  | 03 AGENCY_     |  |
| Not applicable  |  |                |  |
| 01 [] Z. AREA EVACUATED<br>04 DESCRIPTION                             | 02 DATE  | 03 AGENCY_     |  |
| Not applicable  | •  |                | •  |
| 01   1. ACCESS TO SITE RESTRICTED 04 DESCRIPTION                      | 02 DATE  | 03 AGENCY_     |  |
| Not applicable  |  |                |  |
| 01   2. POPULATION RELOCATED  04 DESCRIPTION                          | 02 DATE  | 03 AGENCY      |  |
| Not applicable  | ·<br>  |                | <u> </u>                                     |
| 01   3. OTHER REMEDIAL ACTIVITIES 04 DESCRIPTION                      | 02 DATE  | 03 AGENCY_     |  |
| None  |  |                |  |

III. SOURCES OF INFORMATION (Cite specific references, e.g., state liles, sample analysis, reports)

New York State DEC Region I Files Interview with Walter Lindley, Deputy Commisioner Town Of Babylon (516)957-3000



#### POTENTIAL HAZARDOUS WASTE SITE SITE INSPECTION REPORT PART 11 - ENFORCEMENT INFORMATION

I. IDENTIFICATION

01 STATE 02 SITE NUMBER

II. ENFORCEMENT INFORMATION

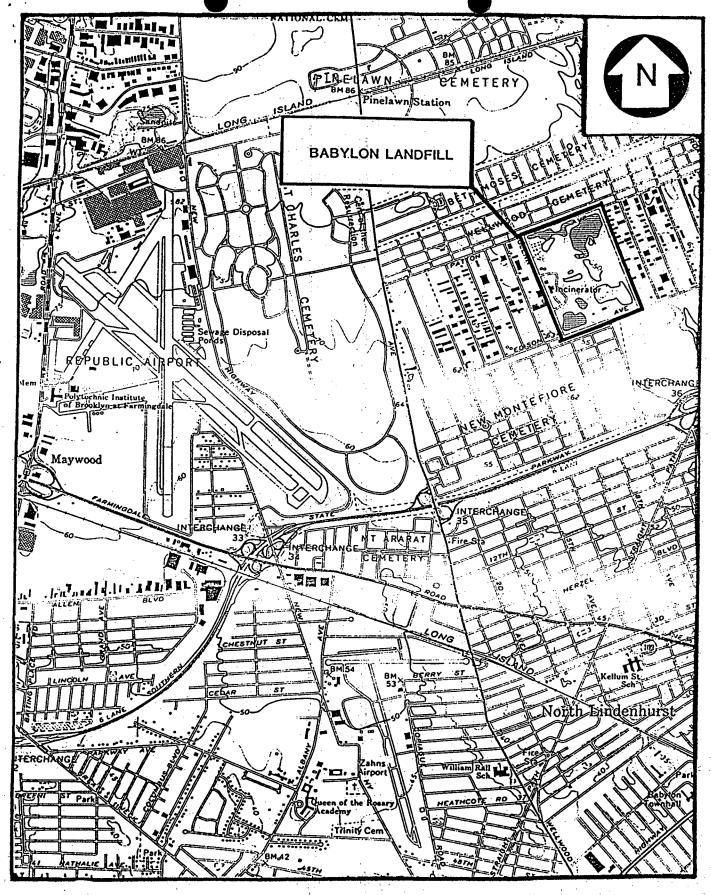
01 PAST REGULATORY/ENFORCEMENT ACTION X YES , NO

02 DESCRIPTION OF FEDERAL, STATE, LOCAL REGULATORY/ENFORCEMENT ACTION

There were two onsite incenerators which ceased operation in 1975 and 1976 after difficulties with EPA air quality standards.

III. SOURCES OF INFORMATION (Cite specific references, e.g., state files, sample analysis, reports)

Interview with Walter Lindley Deputy Commissioner (516) 957-3000



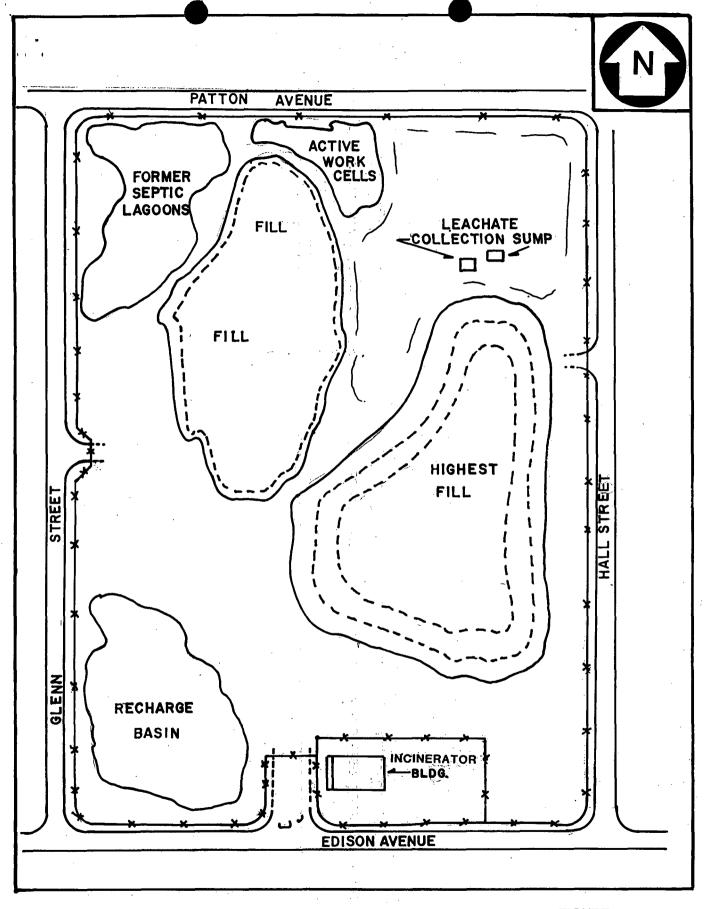
**BABYLON LANDFILL** 

BABYLON ,N.Y.

SITE LOCATION MAP

FIGURE 1





**BABYLON LANDFILL** 

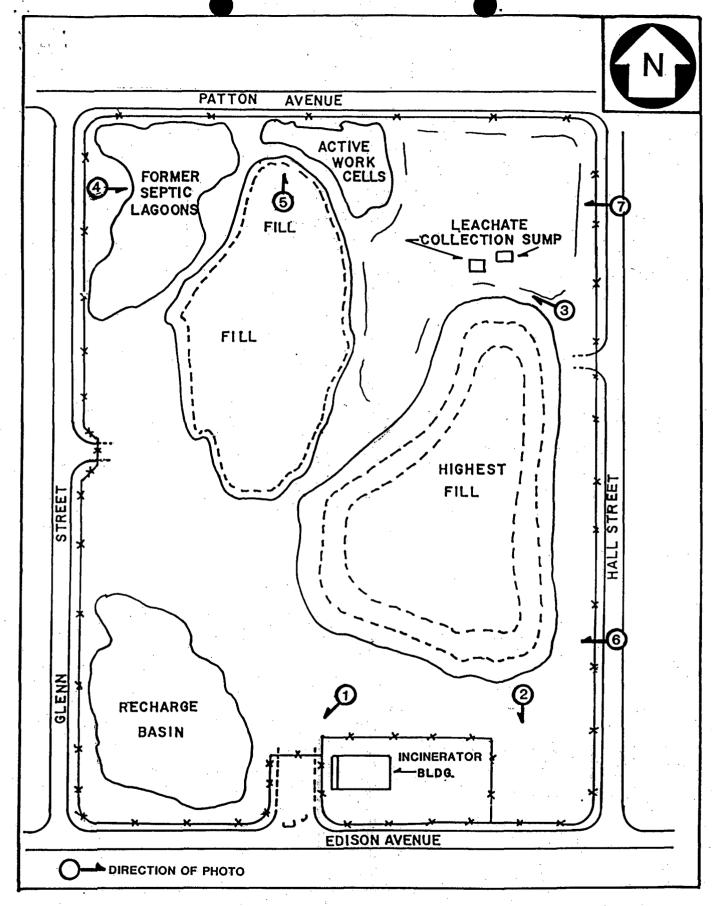
BABYLON, N.Y.

SITE MAP

NOT TO SCALE

FIGURE 2





**BABYLON LANDFILL** 

BABYLON, N.Y.

PHOTO LOCATION MAP

NOT TO SCALE

FIGURE 3



#### INDEX TO PHOTOGRAPHS

#### BABYLON LANDFILL

#### Babylon, New York

#### April 13, 1983

- 1. View west from access road of inactive incinerator buildings.
- 2. View south along access road.
- 3. Leachate seep along northern base of fill.
- 4. View east of former septic lagoon area.
- 5. View north of edge of active work cell.
- 6. Methane venting chimney on east edge of site.
- 7. View west of leachate collection sump at the northwest corner of the site.





 View west from access road of inactive incinerator buildings.



2. View south along access road.

BABYLON LANDFILL, Babylon, New York April 13, 1983





3. Leachate seep along northern base of fill.



4. View east of former septic lagoon area.

BABYLON LANDFILL, Babylon, New York April 13, 1983





5. View north of edge of active work cell.

BABYLON LANDFILL, Babylon, New York April 13, 1983





6. Methane venting chimney on east edge of site.





7. View west of leachate collection sump at the northwest corner of the site.